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U.S. ARMY MEDICAL COMMAND
THE CENTER OF EXCELLENCE IN DISASTER MANAGEMENT AND HUMANITARIAN ASSISTANCE
PACIFIC TELEHEALTH AND TECHNOLOGY HUI

Dengue *Outbreak* in Hawaii

A Global Emerging Infectious Disease Symposium

With Speakers From

Tripler Army Medical Center, Honolulu
University of Hawaii John A. Burns School of Medicine
State of Hawaii Department of Public Health, Division of Communicable Diseases
Center of Excellence in Disaster Management and Humanitarian Assistance, Honolulu
Phramongkutklao Hospital, Bangkok
Armed Forces Research Institute of Medical Sciences, Bangkok
Mahidol University Faculty of Tropical Medicine, Bangkok

Honolulu

Wednesday, 17 October 2001
1600 - 1900

Tripler Army Medical Center
Uphouse Learning Center
4th Floor, G-Wing (Mountainside)

Bangkok

Thursday, 18 October 2001
0900-1200

Phramongkutklao Hospital
8th Floor Videoconferencing Room
Somdej Ya 90 Building

Format: The seminar will be an interactive videoconference with presentations by dengue experts in Hawaii and Bangkok. Attendees will have ample opportunity to dialogue with speakers at both sites. The videoconference system is a unique high-speed link with excellent video and audio transmission, and is part of a larger project known as THAI-HI - Thailand-Hawaii Assessment of Interactive Healthcare Initiative. Project THAI-HI is funded by the Pacific Telehealth and Technology Hui.

Topics: Topics will include an overview of the Hawaii outbreak, clinical syndromes, cutaneous manifestations, diagnostic tests, treatment protocols, epidemiological assessment, vector control, and vaccine development.

Registration: Please pre-register by fax at 808-433-1555. Due to space limitations, the Hawaii audience is limited to 44 participants. Hawaii participants should allow extra time to drive onto the Tripler installation and to park, because of enhanced security. Two forms of picture identification are required.

CME Information. The U.S. Army Medical Command is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. The U.S. Army Medical Command takes responsibility for the content, quality, and scientific integrity of this CME activity. The U.S. Army Medical Command designates this educational activity for a maximum of **3.0 hrs in category 1** credit towards the AMA Physician's Recognition Award. Physicians should claim only those hours of credit are actually spent in the educational activity.

P R O G R A M

Hawaii Time	Thailand Time	Min.	Topic	Speaker
1600	0900	5	Hawaii Opening Remarks	Moderator: Vincent
			Thailand Opening Remarks	Prawit
				THAI Moderator: Wichai (PMK)
1605	0905	10	Dengue Overview	Sriluck
1615	0915	15	Overview of Hawaii Outbreak	Effler (HI DoH)
1630	0930	10	Outbreak Investigation	Selanikio (TAMC)
1640	0940	10	Classic "Breakbone" Fever Atypical Mild Illness	Brown ()
1650	0950	10	Dengue Shock Syndrome Dengue Hemorrhagic Fever	Rudiwilai (PMK)
1700	1000	5	Dermatologic Manifestations	Kenner (TAMC)
1705	1005	10	Hematologic Manifestation	Wichai (PMK)
1715	1015	15		Break
1730	1030	15	Lab Diagnosis	Ananda (PMK)
			- Viral Isolation	
			- Hemagglutination Inhibition	
			- Neutralization Assay	
			- EIA	
1745	1045	10	Dengue PCR	Veerachai (PMK)
1755	1055	15	Pediatric Treatment and Common Pitfalls	Suchitra ()
1810	1110	10	Adult Treatment	Danabhand (PMK)
1820	1120	15	Vector control Research Update	Jones (AFRIMS)
1835	1135	10	Vector Control Model in the Royal Thai Army Installations	Supanee (PMK)
1845	1145	15	Dengue Vaccine Development Update	Mammen, Jr (AFRIMS)
1900	1200		Questions and Answers	Hawaii Moderator: Berg (TAMC)
				THAI Moderator: Wichai (PMK)
			Closing Remarks	Anderson (HI DoH))

Dengue Symposium Registration

Fax

To: Tripler Dept of Medicine

Attn: Sonia Lee-Gushi

Fax: 808-433-1555

Pages: 1

Phone: 808-433-1081

Re: Dengue Conference Registration

I would like to attend the **Dengue Outbreak in Hawaii: A Global Emerging Infectious Disease Symposium** on Wednesday, 17 October 2001, from 4 p.m. to 7 p.m.

Name _____
(Last) (First) (Title)

Name (as you would like it to appear on your nametag) _____

Organization: _____

Address: _____

Phone Number: _____

Fax Number: _____

E-mail: _____

Do you want CME credit for this activity? YES NO

We will fax confirmation of your registration back to you. Thank you.